FEC FORM 3X

2016:08:29:0M:00096502

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

Office Use Jonly 9 AM 10.03

1.	NAME OF COMMITTEE (in full)		TYPE OR PRINT ▼			mple: If typin r the lines.	ig, type	12FE4M5				
LAKETY-YAK												
ΑĐ	DRESS (numb	per and street)	69	16900 SEVEN LOCKS ROAD								
▼	7 Check	if different	(A)	CARIN JOHN								
	than pr	eviously d. (ACC)	ــــــ	HD 208(8-L)								
2.	FEC IDEN	TIFICATION	NUMBER T	, 	CITY A			STATE A		ZIP CODE A		
	C	617	169		3. IS THIS REPORT	N. 1	IEW N) OR	[1] [1	MENDED A)			
4. TYPE OF REPORT (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8)										<u> </u>	Nov 20 (M11) Non-Election	
	(a) Quarter		e On:	Mar 20 (M3)		Jun 20 (M6)	Sep 20 (M9)		Year Only) Dec 20 (M12) (Non-Election			
					Apr 20 (M4)		Jul 20 (M7)	Oc	t 20 (M10)		/ear Only) Jan 31 (YE)	
		ril 15 arterly Report	(Q1) (c)	12-Day		Primary (12P		R-Genera			Runoff (12R)	
		ly 15 larterly Report	(Q2)	PRE-Election	re-	Convention (Specia		الييا		
		tober 15 arterly Report	(Q3)	•				ඨ ~~~~~~~~~~~			[
		nuary 31 ar-End Report	(YE)	E	lection on	(M-V-M-) /	(0,0)			in the State of		
	L Re	ly 31 Mid-Year port (Non-elec ar Only) (MY)		30-Day POST-Elect Report for t	ונייוו	General (300	G)	Runoff	(30R)		Special (30S)	
		rmination Rep ER)	ort	•	Election on	[M~M] /		<u> </u>	Y	in the State of		
5. Covering Period DT 'DT 'ZOLG through DB ' 19 ' ZOLG												
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.												
Type or Print Name of Treasurer CONSTANTINE JEDES												
Signature of Treasurer Criterius Date 08 22 2516												
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.												
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